## PART B - FEE(S) TRANSMITTAL

and send this form, together with applicable fee(s), to: Mail

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maintenance fee notification									
	E ADDRESS (Note: Use Block 1 for	any change of address)	F <sub>0</sub>	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
Sean D. Solberg DORSEY & WHIT Intellectual Propert 50 South Sixth Stre	TNEY LLP by Department		. I Si	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.					
Minneapolis, MN				Susan Nie	(Depositor's name)				
• •			Γ	Susan	Tienal	(Signature)			
				January 5,	2005	(Date)			
APPLICATION NO.	PLICATION NO. FILING DATE FIRST NAMED INV								
10/751,351	01/05/2004	Jam	es R. Hornsby	ALIAL IDAAE CUC	RDOF2 08877937 10751	351 <sup>2223</sup>			
TITLE OF INVENTION: A	MUSEMENT DEVICE		. 11		INDUIT AAAAATOI TAITT				
			Ť	01 FC:2501 02 FC:1504		700.00 OP 300.00 OP			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PŲB	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	YES	\$685		\$300	\$985	02/03/2005			
EXAM	IINER	ART UNIT	CĻA	SS-SUBCLASS					
ABDELWA	3722	4	46-454000						
CFR 1.363).  Change of correspond Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	e address or indication of "Follower address (or Change of 22) attached.  tion (or "Fee Address" Indication more recent) attached. Use	Correspondence (1) the or ag (2) the regist 2 reg listed	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
	RESIDENCE DATA TO B								
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee data wil of this form is NOT a subs	l appear on the itute for filing	patent. If an assign an assignment.	ee is identified below, the	document has been filed for			
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Please check the appropriate	e assignee category or catego	ries (will not be printed on	the patent) :	Individual 🚨 C	orporation or other private g	group entity Government			
4a. The following fec(s) are	enclosed:		nt of Fee(s):						
Issue Fee	small entity discount permitte	_		ount of the fee(s) is en					
Advance Order - # o						or credit any overpayment, to copy of this form).			
<u> </u>	(from status indicated above	e)							
	MALL ENTITY status. See		• •		LL ENTITY status. See 37				
NOTE: The Issue Fee and I	is requested to apply the Iss Publication Fee (if required) ords of the United States Pat	will not be accepted from a	nyone other tha	n the applicant; a reg	istered attorney or agent; or	the assignee or other party in			
Authorized Signature	12/	d		DateI	anuary 5, 2005				
	Sean D. Solbe	_		Registration					
This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	pplication form to the USP1 s for reducing this burden, s ginia 22313-1450. DO NOT	11. The information is req 122 and 37 CFR 1.14. Th O. Time will vary depend hould be sent to the Chief SEND FEES OR COMPL	uired to obtain is collection is ing upon the information Of ETED FORMS	or retain a benefit by estimated to take 12 dividual case. Any conficer, U.S. Patent and TO THIS ADDRES	the public which is to file (a minutes to complete, includ omments on the amount of Trademark Office, U.S. De S. SEND TO: Commissione	and by the USPTO to process) ling gathering, preparing, and time you require to complete epartment of Commerce, P.O. er for Patents, P.O. Box 1450,			

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Fees pursuant to the Co	Complete if Known											
TIPE				Application No.	10/751,	351		•				
FEE TR	Filing Date	January	January 5, 2004									
AN 1 0 2005 (F	First Named Inventor	James	James R. Hornsby									
	Group Art Unit	3722	3722									
TANTE ant claims	Examiner	A. Abde	A. Abdelwahed									
TOTAL AMOUNT OF PA	TOTAL AMOUNT OF PAYMENT (\$) 1,000.00					6677.02						
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account No. 04-1420 Deposit Account Name: Dorsey & Whitney LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge the fee	e(s) indicate	d below		Charge fee(s) indi	cated belov	w, except fo	or the f	iling fee				
Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17												
WARNING: Information on authorization on PTO-2038	this form may		Credit card informa	tion should not be include	d on this form	n. Provide cre	dit card	information and				
FEE CALCULATION												
1. BASIC FILING, SE	ARCH, ANI	D EXAMINATI	ON FEES									
	FILING FEES SEARCE					EXAMINATION FEES						
Application Type	<u>Fee (\$)</u>	Small Entity Fee (\$)	<u>Fee (\$)</u>	Small Entity Fee (\$)	Fee (\$)	Small Er Fee (\$		Fees Paid (\$)				
Utility	300	150	500	250	200	100	\$	•				
Design	200	100	100	50	130	65	\$					
Plant	200	100	300	150	160	80	\$					
Reissue	300	150	500	250	600	300	\$					
Provisional	200	100	0	0	0	0	\$					
2. EXCESS CLAIM FEES  Fee Description  Small Entity Fee (\$) Fee (\$)												
Each claim over 20 or, fe		50	25									
Each independent claim				-	al patent		200	100				
Multiple dependent clair		ŕ	•	J	•		360	180				
Total Claims	Extra CI	aims	Fee (\$)	Fee Paid (\$)		Multiple Dep						
-20 or HF		X		= \$		ee (\$)		ee Paid (\$)				
HP=highest number of total of				•	\$		\$					
Indep. Claims	Extra C	•	Fee (\$)	Fee Paid (\$)	•		•					
-3 or HP		X		= \$								
HP=highest number of indep	endent claims	paid for, if greater	than 3									
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets	Extra Sheets	• ,	` ' '	nal 50 or fraction thereo	<u>f</u>	Fee (\$)	ı j	Fee Paid (\$)				
- 100 =		/ 50 =	(round up	to a whole number)	x \$		\$					
3. OTHER FEE(S)  Fee Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)												
Other: Issue Fee of \$700.00 and Publication Fee of \$300.00 \$ 1,000.00												
Submitted by:												
Name: Sean D. Solberg Reg. No.: 48,653					Telephone: (612) 340-7862							
Signature:						Date: January 5, 2005						

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